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FOR SE OF FORM 24/48			

FEC Schedule E (Form 24/28) Rev. 09/2013

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Form/Schedule: F24N

Transaction ID :

Due to FEC File software not calculating the aggregate for the special-runoff election, please find the aggregate disclosed as memo text as recommended by FEC Analyst, Mr. Clyde Hinton. Aggregate for Georgia Senate Special-Runoff is \$987,633.34.

Form/Schedule:

Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 3 OF 19
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee EAN Services LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address PO Box 402383		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">12500.00</div>	
City Atlanta	State GA	Zip Code 30384	Transaction ID : SE.31797
Purpose of Expenditure Travel (estimate)		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate LOEFFLER, KELLY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

Full Name of Payee EAN Services LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address PO Box 402383		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">12500.00</div>	
City Atlanta	State GA	Zip Code 30384	Transaction ID : SE.31798
Purpose of Expenditure Travel (estimate)		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate WARNOCK, RAPHAEL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">25000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE	4	OF	19
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Erick Erickson, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020	
Mailing Address PO Box 28978		Amount 12500.00	
City Macon	State GA	Zip Code 31221	Transaction ID : SE.31767
Purpose of Expenditure Media Production / Media Placement		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 30 / 2020
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee Erick Erickson, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020	
Mailing Address PO Box 28978		Amount 12500.00	
City Macon	State GA	Zip Code 31221	Transaction ID : SE.31768
Purpose of Expenditure Media Production / Media Placement		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 30 / 2020
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Gross, Jennifer, , ,

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Date

MM / DD / YYYY
12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee Erick Erickson, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020		
Mailing Address PO Box 28978			Amount 12500.00		
City Macon	State GA	Zip Code 31221	Transaction ID : SE.31809		
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 30 / 2020		
Name of Federal Candidate LOEFFLER, KELLY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff		

Full Name of Payee Erick Erickson, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020		
Mailing Address PO Box 28978			Amount 12500.00		
City Macon	State GA	Zip Code 31221	Transaction ID : SE.31810		
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 30 / 2020		
Name of Federal Candidate WARNOCK, RAPHAEL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	

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Gross, Jennifer, , ,

[Electronically Filed]

Date

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 12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 6 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee FP1 Digital, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020	
Mailing Address 3001 Washington Blvd 7th Floor		Amount 30938.12	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31778
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee FP1 Digital, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020	
Mailing Address 3001 Washington Blvd 7th Floor		Amount 30938.11	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31779
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	61876.23
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Date

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12 / 03 / 2020

Signature

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y

Full Name of Payee FP1 Digital, LLC		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>12 / 03 / 2020</div> </div>	
Mailing Address 3001 Washington Blvd 7th Floor		Amount <div> <div></div> <div>30938.12</div> </div>	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31795
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>12 / 03 / 2020</div> </div>
Name of Federal Candidate LOEFFLER, KELLY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>30938.12</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Runoff

Full Name of Payee FP1 Digital, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020	
Mailing Address 3001 Washington Blvd 7th Floor		Amount 30938.11	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31796
Purpose of Expenditure Media Production / Media Placement	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020	
Name of Federal Candidate WARNOCK, RAPHAEL, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: GA
Calendar Year-To-Date Per Election for Office Sought	30938.11	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 5px; width: 200px;">61876.23</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="border: 1px solid black; height: 30px;"></div>
(c) TOTAL Independent Expenditures.....	▶	<div style="border: 1px solid black; height: 30px;"></div>

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Signature

Date _____

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 8 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee FP1 Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3001 Washington Blvd 7th Floor		Amount 22292.84	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31771
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee FP1 Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3001 Washington Blvd 7th Floor		Amount 22292.84	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.31772
Purpose of Expenditure Media Production / Media Placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	44585.68
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Gross, Jennifer, , ,

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Date

MM / DD / YYYY
12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 10 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020
Mailing Address 3100 Smoketree Ct. Suite 900		Amount 37500.00
City Raleigh	State NC	Zip Code 27604
Purpose of Expenditure Canvassing / Travel	Category/Type	Transaction ID : SE.31765 Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020
Name of Federal Candidate PERDUE, DAVID, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
		300362.42

Full Name of Payee Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020
Mailing Address 3100 Smoketree Ct. Suite 900		Amount 37500.00
City Raleigh	State NC	Zip Code 27604
Purpose of Expenditure Canvassing / Travel	Category/Type	Transaction ID : SE.31766 Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020
Name of Federal Candidate OSSOFF, T. JONATHAN, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
		337862.42

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	75000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 11 OF 19
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 01 / 2020</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">37500.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.31811 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 01 / 2020</div> </div>
Purpose of Expenditure Canvassing / Travel		Category/Type	
Name of Federal Candidate LOEFFLER, KELLY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">37500.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

Full Name of Payee Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 01 / 2020</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">37500.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.31812 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 01 / 2020</div> </div>
Purpose of Expenditure Canvassing / Travel		Category/Type	
Name of Federal Candidate WARNOCK, RAPHAEL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">37500.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gross, Jennifer, , ,

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 12 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee i360		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020	
Mailing Address P.O. Box 37046		Amount 2500.00	
City Baltimore	State MD	Zip Code 21297-3046	Transaction ID : SE.31773
Purpose of Expenditure Dialer Access (estimate)	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020	
Name of Federal Candidate PERDUE, DAVID, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee i360		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 01 / 2020	
Mailing Address P.O. Box 37046		Amount 2500.00	
City Baltimore	State MD	Zip Code 21297-3046	Transaction ID : SE.31801
Purpose of Expenditure Dialer Access (estimate)	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2020	
Name of Federal Candidate LOEFFLER, KELLY, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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FOR SE OF FORM 24/48	

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee i360		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 37046		Amount <input type="text"/>	
City Baltimore	State MD	Zip Code 21297-3046	Transaction ID : SE.31825
Purpose of Expenditure Dialer Access (estimate)	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate WARNOCK, RAPHAEL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
2500.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

Full Name of Payee i360		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 37046		Amount <input type="text"/>	
City Baltimore	State MD	Zip Code 21297-3046	Transaction ID : SE.31826
Purpose of Expenditure Dialer Access (estimate)	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
887448.10		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<input type="text"/>
(c) TOTAL Independent Expenditures..... ►	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

 / /

Signature

FEC IDENTIFICATION NUMBER ▼

Amount

250000.00

Transaction ID : SE.31769

Date of Disbursement or Obligation

12 / 01 / 2020

Office Sought: ☐ House District: _____
☐ President ☒ Senate State: GA

587862.42

Disbursement For: ☐ Primary ☐ General
2021 ☒ Other (specify) ▶ Runoff

12 / 01 / 2020

Amount

250000.00

Transaction ID : SE.31770

Date of Disbursement or Obligation

MM / DD / YYYY

Office Sought: ☐ House District: _____
☐ President ☒ Senate State: GA

837862.42

Disbursement For: ☐ Primary ☐ General
2021 ☒ Other (specify) ▶ Runoff

500000.00

A blank grid consisting of 10 columns and 2 rows of squares, intended for drawing a diagram.

[Electronically Filed]

Date _____

MM / DD / YYYY

FEC IDENTIFICATION NUMBER ▼

Amount

250000.00

Transaction ID : SE.31805

Date of Disbursement or Obligation

Office Sought: ☐ House District: _____
☐ President ☒ Senate State: GA

250000.00

Disbursement For: ☐ Primary ☐ General
2021 ☒ Other (specify) ► Special-Runoff

MM / DD / YYYY

Amount

250000.00

Transaction ID : SE.31808

Date of Disbursement or Obligation

Office Sought: ☐ House District: _____
☐ President ☒ Senate State: GA

250000.00

Disbursement For: ☐ Primary ☐ General
2021 ☒ Other (specify) ► Special-Runoff

500000.00

A blank grid consisting of 10 columns and 5 rows of squares, intended for drawing a diagram.

[Electronically Filed]

Date _____

MM / DD / YYYY

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 16 OF 19
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Tradewinds Consulting, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020	
Mailing Address 21850 Inglewood Ct.		Amount 5679.51	
City Ashburn	State VA	Zip Code 20148	Transaction ID : SE.31817
Purpose of Expenditure Printing / Production / Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee Tradewinds Consulting, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020	
Mailing Address 21850 Inglewood Ct.		Amount 5679.50	
City Ashburn	State VA	Zip Code 20148	Transaction ID : SE.31818
Purpose of Expenditure Printing / Production / Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11359.01
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 17 OF 19
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Tradewinds Consulting, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020
Mailing Address 21850 Inglewood Ct.		Amount 5679.51
City Ashburn	State VA	Zip Code 20148
Purpose of Expenditure Printing / Production / Postage	Category/Type	Transaction ID : SE.31819 Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate LOEFFLER, KELLY, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Runoff

Full Name of Payee Tradewinds Consulting, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 03 / 2020
Mailing Address 21850 Inglewood Ct.		Amount 5679.50
City Ashburn	State VA	Zip Code 20148
Purpose of Expenditure Printing / Production / Postage	Category/Type	Transaction ID : SE.31820 Date of Disbursement or Obligation MM / DD / YYYY 12 / 03 / 2020
Name of Federal Candidate WARNOCK, RAPHAEL, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-Runoff

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11359.01
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 18 OF 19
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Usio, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3611 Paesanos Pkwy, Suite 300		Amount 975.00	
City San Antonio	State TX	Zip Code 78213	Transaction ID : SE.31774
Purpose of Expenditure Canvassing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2020	
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee Usio, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3611 Paesanos Pkwy, Suite 300		Amount 975.00	
City San Antonio	State TX	Zip Code 78213	Transaction ID : SE.31775
Purpose of Expenditure Canvassing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2020	
Name of Federal Candidate OSSOFF, T. JONATHAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1950.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Date

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12 / 03 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE	19	OF	19
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Usio, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3611 Paesanos Pkwy, Suite 300		Amount 975.00	
City San Antonio	State TX	Zip Code 78213	Transaction ID : SE.31799
Purpose of Expenditure Canvassing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2020	
Name of Federal Candidate LOEFFLER, KELLY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

Full Name of Payee Usio, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 3611 Paesanos Pkwy, Suite 300		Amount 975.00	
City San Antonio	State TX	Zip Code 78213	Transaction ID : SE.31800
Purpose of Expenditure Canvassing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2020	
Name of Federal Candidate WARNOCK, RAPHAEL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► Special-Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1499541.83

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 03 / 2020

Signature